REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF

	Approved for use through 12/31/2008, OMB 0651-003
Application Number	10/601,828
Filing Date	06-23-2003
First Named Inventor	Guo Deng
Group Art Unit	3724
Examiner Name	Dexter, Clark F.
Attorney Docket Number	2451.PCRA.PT

PRESPONDENCE ADDRESS missioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Please withdraw me as attorney or agent for the above identified patent application, and ☑ all the attorneys/agents of record. ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or ☐ the attorneys/agents associated with Customer Number NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number. The reasons for this request are: Applicant's Request **CORRESPONDENCE ADDRESS** The correspondence address is NOT affected by this withdrawal. 1. Change the correspondence address and direct all future correspondence to : 2. Ø ☐ The address associated with Customer Number OR Firm or Michael A. Lisi X Individual Name Honigman Miller Schwartz and Cohn, LLP Address 38500 Woodward Avenue, Suite 100 Address 48304-5048 **Bloomfield Hills** State MI Zip Code City Country US Email Telephone (248) 566-8504 Signature Registration No. 40,567 Name Telephone No. (801) 478-0071 Date September 7, 2007

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.